944068

**Application or Docket Number** 

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

| 410 | 802 |
|-----|-----|
|     |     |

| CLAIMS AS FILED - PART I  |  |                 |                                 |              |          |  |                  | SMALL              | ENTITY             |                        | OTHER |  |                        |
|---|--|-----------------|---------------------------------|--------------|----------|--|------------------|--------------------|--------------------|------------------------|-------|--|------------------------|
| (Column 1) (Column 2  |  |                 |                                 |              | 1 -      | TYPE                                       | <u> </u>         | OR                 | SMALL              | ENTITY                 |       |  |                        |
| FOR .   |  | NUMBER FILED    |                                 | NUMBER EXTRA |          |  | RATE             | FEE                |                    | RATE                   | FEE   |  |                        |
| BASIC FEE   |  |                 |                                 |              |          |  |                  |                    | 380.00             | OR                     |       | 760.00                                 |                        |
| TOTAL CLAIMS  |  |                 |                                 | *            | <u> </u> |  | X\$ 9=           |                    | OR                 | X\$18=                 | 8     |  |                        |
| INDEPENDENT CLAIMS  |  |                 |                                 |              | <u> </u> | -  | 1                | X39=               |                    | OR                     | X78=  |  |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |                 |                                 |              |          |  |                  | ] [                | +130=              |                        | OR    | +260=                                  |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2              |  |                 |                                 |              |          |  | ,                | TOTAL              |                    | OR                     | TOTAL | 208                                    |                        |
| CLAIMS AS AMENDED - PART II 3 70 (TO (Column 1) (Column 2) (Column 3)                 |  |                 |                                 |              |          |  |                  |                    | SMALL              | ENTITY                 | OR    | OTHER<br>SMALL                         | 9                      |
| ENT A   |  | REM<br>AF       | AIMS<br>AINING<br>TER<br>IDMENT |              | P        | HIGHEST<br>NUMBER<br>REVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |                    | RATE               | ADDI-<br>TIONAL<br>FEE |       | RATE                                   | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT   | Total  | *               | 19                              | Minus        | **       | 20   | = /              |                    | X\$ 9=             |                        | OR    | X\$18=                                 |                        |
| AME   | Independent  | *               | 3<br>IN OF M                    | Minus        | **       | <u> </u>                                   | =/               | $\left\{ \  ight[$ | X39=               |                        | OR    | X78=                                   |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |                 |                                 |              |          |  |                  |                    | +130=              |                        | OR    | +260=                                  |                        |
|   |  |                 |                                 |              |          |  |                  |                    | TOTAL<br>ODIT, FEE |                        | OR    | TOTAL<br>ADDIT, FEE                    |                        |
| (Column 1) (Column 2) (Column 3)  |  |                 |                                 |              |          |  |                  |                    | OUT. FEE           |                        |       | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 7                      |
| AMENDMENT B   |  | CL<br>REM<br>AF | AIMS<br>AINING<br>TER<br>IDMENT |              | 763      | HIGHEST<br>NUMBER<br>REVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |                    | RATE               | ADDI-<br>TIONAL<br>FEE |       | RATE                                   | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *               | •                               | Minus        | **       |  | =                |                    | X\$ 9=             |                        | OR    | X\$18=                                 |                        |
| <b>AME</b>  | Independent  | *               |                                 | Minus        | , **     |  | 3                | ] [                | X39=               |                        | OR    | X78=                                   |                        |
|   | FIRST PRESE  | NTATIC          | ON OF M                         | ULTIPLE (    | EPENI    | DENT CLAIN                                 | <u> </u>         | <b>」</b>           | +130=              |                        | OR    | +260=                                  |                        |
| · ·   |  |                 |                                 |              |          |  |                  | _<br>A             | TOTAL<br>DDIT, FEE |                        | OR    | TOTAL<br>ADDIT, FEE                    |                        |
|   |  |                 | umn 1)                          |              |          | Column 2)                                  | (Column 3)       |                    |                    |                        |       |  |                        |
| AMENDMENT C   |  | REM.<br>AF      | AIMS<br>AINING<br>TER<br>IDMENT |              | PI       | HIGHEST<br>NUMBER<br>REVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |                    | RATE               | ADDI-<br>TIONAL<br>FEE |       | RATE                                   | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *               |                                 | Minus        | **       |  | =                |                    | X\$ 9=             |                        | OR    | X\$18=                                 |                        |
|   | Independent  | *               |                                 | Minus        | **       |  | =                | ] [                | X39=               |                        | OB    | X78=                                   |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |                 |                                 |              |          |  | J ├              |                    |                    | OR                     |       |  |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |                 |                                 |              |          |  |                  | +130=<br>TOTAL     |                    | OR                     | +260= |  |                        |
| ***   | If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  ADDIT. FEE  ADDIT. FEE  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.  |                 |                                 |              |          |  |                  |                    |                    |                        |       |  |                        |
|   | Company of the control of the contro |                 |                                 |              |          |  |                  |                    |                    |                        |       |  |                        |